

FRATERNAL SOCIETIES

COMPANY NAME: _____ NAIC Company Code: _____

Contact: _____ Telephone: _____

REQUIRED FILINGS IN THE STATE OF: CONNECTICUT

Filings Made During the Year 2002

(1) Check-list	(2) Line #	(3) REQUIRED FILINGS FOR THE ABOVE STATE	(4) NUMBER OF COPIES*			(5) DUE DATE	(6) FORM SOURCE **	(7) APPLICABLE NOTES
			Domestic		Foreign			
			State	NAIC	State			
		I. NAIC FINANCIAL STATEMENTS						
	1	Annual Statement (8 1/2"x14")	2	1	1	3/1	NAIC	
	1.1	Printed Schedule A detail	2	1	xxx	3/1	NAIC	"M"
	1.2	Printed Schedule B detail	2	1	xxx	3/1	NAIC	"M"
	1.3	Printed Schedule BA detail	2	1	xxx	3/1	NAIC	"M"
	1.4	Printed Schedule D – Parts 1-6 detail (excluding Part 1A)	2	1	xxx	3/1	NAIC	"M"
	1.5	Printed Schedule DA – Part 1 detail	2	1	xxx	3/1	NAIC	"M"
	1.6	Printed Schedule DB detail	2	1	xxx	3/1	NAIC	"M"
	1.7	Printed Schedule E – Part 1 detail	2	1	xxx	3/1	NAIC	"M"
	2	Quarterly Financial Statement (8 1/2" x 14")	2	0	1	5/15, 8/15, 11/15	NAIC	
	3	Separate Accounts Annual Statement (8 1/2"x 14")	2	1	1	3/1	NAIC	
		II. NAIC SUPPLEMENTS						
	10	Accident & Health Policy Experience Exhibit	2	1	1	4/1	NAIC	
	11	Interest Sensitive Life Insurance Products Report	2	1	xxx	4/1	NAIC	"M"
	12	Investment Risk Interrogatories	2	1	1	4/1	NAIC	
	13	Long Term Care Experience Reporting Forms	2	1	xxx	4/1	NAIC	"M"
	14	Long Term Care Insurance Exhibit	2	1	xxx	3/1	NAIC	"M"
	15	Management Discussion & Analysis	2	1	1	4/1	Company	
	16	Medicare Supplement Insurance Experience Exhibit	2	1	xxx	3/1	NAIC	"M"
	17	Risk-Based Capital Report	1	1	N/A	3/1	NAIC	
	18	Statement of Actuarial Opinion	2	1	1	3/1	Company	
	19	Statement on non-guaranteed elements – Exhibit 8 Interr. #12	2	1	1	3/1	Company	
	20	Supplemental Compensation Exhibit	2	N/A	N/A	3/1	NAIC	
	21	Supplement to Valuation Report	2	1	1	6/30	NAIC	
	22	SVO Compliance Certification	2	1	1	3/1, 5/15, 8/15, 11/15	NAIC	
	23	Trusted Surplus Statement	xxx	1	xxx	3/1, 5/15, 8/15, 11/15	NAIC	"M"
		III. ELECTRONIC FILING REQUIREMENTS						
	30	Annual Statement Electronic Filing	xxx	1	xxx	3/1	NAIC	
	31	March .PDF Filing	xxx	1	xxx	3/1	NAIC	
	32	Separate Accounts Electronic Filing	xxx	1	xxx	3/1	NAIC	
	33	Separate Accounts .PDF Filing	xxx	1	xxx	3/1	NAIC	
	34	Supplemental Electronic Filing	xxx	1	xxx	4/1	NAIC	
	35	Supplemental .PDF Filing	xxx	1	xxx	4/1	NAIC	
	36	June .PDF Filing	xxx	1	xxx	6/1	NAIC	
		IV. AUDITED FINANCIAL STATEMENTS						
	51	Accountants Letter of Qualifications	1	N/A	1	6/1	Company	
	52	Audited Financial Statements	1	1	1	6/1	Company	
	53	Audited Financial Statements Exemption Affidavit	0	N/A	N/A		Company	
	54	Designation of Independent CPA	1	N/A	N/A	Within 60 days of becoming subject to such regulation	Company	
	55	Notification of Adverse Financial Condition	1	N/A	1	Within 5 business days of company notification	Company	
	56	Report of Significant Deficiencies in Internal Controls	1	N/A	1	Within 60 days of annual report filing	Company	
	57	Request for Exemption to File	1	N/A	N/A	12/31	Company	
		V. STATE REQUIRED FILINGS						
	101	Filings Checklist (with Column 1 completed)	2	1	1	3/1, 5/15, 8/15, 11/15	State	
	102	Premium tax	0	0	0		State	"D"
	103	Retention of Assets Statement	2	0	0	3/1	State	
	104	Accident & Health Advertising Certificate of Compliance	2	0	1	3/1	Company	"O"
	105	State Filing Fees	0	0	0		State	"C"

*If XXX appears in this column, this state does not require this filing, if hard copy is filed with the state of domicile and the NAIC and if the data is filed electronically with the NAIC. If N/A appears in this column, the filing is required with the domiciliary state.

**If Form Source is NAIC, the form should be obtained from the appropriate vendor.

		NOTES AND INSTRUCTIONS (A-K APPLY TO ALL FILINGS)	
	A	Required Filings Contact Person:	Louis J. Scotti, Chief Examiner Financial Analysis & Compliance Division (860) 297-3814 E-Mail – Louis.Scotti@po.state.ct.us
	B	Mailing Address:	Connecticut Insurance Department P.O. Box 816 Hartford, CT 06142-0816 <u>EXPRESS/HAND DELIVERY:</u> Connecticut Insurance Department 153 Market Street Hartford, CT 06103
	C	Mailing Address for Filing Fees:	Same as above - Checks should be made payable to Treasurer, State of Connecticut. Department will invoice companies for appropriate fees, please <u>do not</u> send fees with annual/quarterly filings.
	D	Mailing Address for Premium Tax Payments:	Connecticut Department of Revenue Services P.O. Box 2990 Hartford, CT 06102-5034 Rosemary Cleary (860) 541-3226
	E	Delivery Instructions:	Filings sent by the United States Postal Service must be postmarked no later than the indicated due date. Filings sent by a private delivery service will be considered filed on the date physically received by the Department. Refer to Connecticut Bulletin FS-16-92.
	F	Late Filings:	Companies will be fined \$100 per day for a late annual statement or quarterly statement filing.
	G	Original Signatures:	Original signatures are required on all filings from domestic companies. Foreign companies should follow the NAIC Annual Statement Instructions.
	H	Signature/Notarization/Certification:	The following officers are required to sign the annual/quarterly statements: President or Vice President, AND Secretary or Assistant Secretary
	I	Amended Filings:	Domestic companies are instructed to refer to Connecticut General Statutes §38a-53a.
	J	Exceptions from normal filings:	Please follow the NAIC Annual Statement Instructions
	K	Bar Codes (State or NAIC)	Please follow the NAIC Annual Statement Instructions
	L	NONE Filings:	Please follow the NAIC Annual Statement Instructions
	M	Filings new, discontinued or modified materially since last year:	The Connecticut Insurance Department follows the Annual Statement Instructions related to investment schedule detail and certain supplements. As such, certain items that are captured on the NAIC database are not required to be submitted in hard copy format from foreign insurers.
	N	Filings discontinued or modified materially since last year:	No longer require the following to be filed: Canadian Statement and Participating Annual Statement.
	O	Accident & Health Advertising Certificate of Compliance	Companies are referred to §38a-819-18(B) of the Regulations of Connecticut State Agencies for further details.
	P	State Page – Quarterly Supplement Property & Casualty Companies	Companies are required to file page 24 of the annual statement with each quarterly statement.

**General Instructions
For Companies to Use Checklist**

Please Note: This state's instructions for companies to file with the NAIC are included in this Checklist. The NAIC will send mailing labels and other information to all companies but will not be sending their own checklist this year.

Electronic filing is intended to include filing via the Internet or filing via diskette with the NAIC. Companies that file with the NAIC via the Internet are not required to submit diskettes to the NAIC.

Column (1) (Checklist)

Companies may use the checklist to submit to a state, if the state requests it. Companies should copy the checklist and place an "x" in this column when mailing information to the state.

Column (2) (Line #)

Line # refers to a standard filing number used for easy reference. This line number may change from year to year.

Column (3) (Required Filings)

Name of item or form to be filed.

The **Annual Statement Electronic Filing** includes the annual statement data and all supplements due March 1, per the *Annual Statement Instructions*. This includes all detail investments schedules and other supplements for which the *Annual Statement Instructions* exempt printed detail.

The **March .PDF Filing** is .pdf files for annual statement data, detail for investment schedules, Officers and Directors Information and supplements due March 1.

The **Separate Accounts Electronic Filing** includes the separate accounts annual statement and investment schedule detail.

The **Separate Accounts .PDF Filing** is the .pdf file for the separate accounts annual statement and investment schedule detail.

The **Supplemental Electronic Filing** includes all supplements due April 1, per the *Annual Statement Instructions*.

The **Supplemental .PDF Filing** is the .pdf file for all supplements due April 1.

The **June .PDF Filing** is the .pdf file for the Audited Financial Statements.

Column (4) (Number of Copies)

Indicates the number of copies that each foreign or domestic company is required to file for each type of form. The Blanks (E) Task Force modified the 1999 *Annual Statement Instructions* to waive paper filings of certain NAIC supplements and certain investment schedule detail, if such investment schedule data is available to the states via the NAIC database. The checklists reflect this action taken by the Blanks (E) Task Force. XXX appears in the "Number of Copies" "Foreign" column for the appropriate schedules and exhibits.

Column (5) (Due Date)

Indicates the date on which the company must file the form.

Column (6) (Form Source)

This column contains one of three words: "NAIC," "State," or "Company." If this column contains "NAIC," the company must obtain the forms from the appropriate vendor. If this column contains "State," the state will provide the forms with the filing instructions (generally, on its website). If this column contains "Company," the company, or its representative (e.g., its CPA firm), is expected to provide the form based upon the appropriate state instructions or the NAIC *Annual Statement Instructions*.

Column (7) (Applicable Notes)

This column contains references to the Notes to the Instructions that apply to each item listed on the checklist. The company should carefully read these notes before submitting a filing.